



BACKGROUND CHECK REQUEST

Please send completed form to:

7/7/2010

Administrative Officer
Pine Hills CJIN Terminal Manager
4 N. Haynes Ave.
Miles City, MT 59301

Once background check is completed, send results to:

Youth Community Corrections Bureau Chief
PO Box 201301
Helena, MT 59620-1301

Employee/Contractor requesting information: (****Required fields**)

Name**				Title **	
Address**					
City**		State**		Zip	
Phone **				Fax	
Reason** (i.e., employment, volunteer, placement)					

All requested information is required.

If an item is not applicable (for example if you have never used another name) write N/A in the AKA area.

First, Middle, Last Name	_____
AKA's (Include maiden and previous married names)	_____
<i>Please provide other states lived in, if applicable</i>	_____
Social Security Number	_____
Date of Birth	_____
Current Address	_____ _____ _____
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female